DEMOCOPHES Demonstration of a study to coordinate and perform human biomonitoring on a European Scale

SEVENTH FRAMEWORK

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Human Biomonitoring

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Needs and potential for HBM as policy tool in Europe

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SEVENTH FRAMEWORK

HUMAN BIOMONITORING FOR EUROPE a harmonised approach

Key policy requirements and needs related to HBM?

- A) Translation of biomonitoring results into policy recommendations
 - Reliable and scientifically robust results with sufficient quality in relevant policy areas
 - Reduced delay in and improved accessibility of Hbm data
 - Better knowledge about average exposure to environmental chemicals (reference values)
 - bridge the gap between environment and health data (reference and HBM guidance values)
 - Communication of results in an easy and correct way
- B) Accepted chemical parameters and study design (international level, national scope, study participants)
- C) Feasible cost benefit relations (sample size, linkage to existing schemes and structures

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Key challenges for HBM as policy tool?

- \rightarrow Identification of priority substances
- \rightarrow Proper interpretation and use of HBM data for policy making initiatives
- Need of reference (surveillance) and health based (research studies) values
- comparable data, necessary level of representativeness and data accessibility
- Integration of HBM information with
 - \rightarrow information from environmental monitoring
 - \rightarrow information from health surveillance
 - \rightarrow modelling work for external and internal exposure including mixtures
- Sustainable structures for gathering, storing and analyzing biomarker and other data
- \rightarrow Appropriate communication of results



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Potential support of HBM for chemicals management?

1. Supply most relevant exposure data

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- Encourage initiation of further investigations (REACh Art 45, para 5)
- 3. Identify substances of very high concern (SVHC) or chemicals of equivalent-concern (REACh, Annex XIV)
- Control efficiency of risk reduction measures or substitution in authorized substances underlying minimization requirements (REACh Art. 60, para 10)







Further needs and major priorities from point of view of participants

?



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Follow-up to (DEMO)COPHES and involved partners?

- 1. Reduced delay and improved data storage and accessibility (EEA)
- 2. Make HBM data available in formats suitable for different users (WHO, UNEP)
- 3. Upscale to an EU HBM survey on a representative sample of the European population (Member States)
- 4. Cover further chemicals in coordination with EU institutions (ECHA, EFSA)
- 5. Integrate with socio-economic data (ESTAT)
- 6. Improve link with spatial data infrastructure development (INSPIRE)
- 7. Collaborate or integrate with established national survey schemes (EHES)
- 8. Integrate exposure data and HBM data with pharmacokinetic models, body burden modelling (JRC)

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Steps forward and tools to promote HBM at EU level?

- <u>A transparent process to define EU HBM reference and health based</u> <u>values</u>; this could build on the process defined for exposure limits for chemicals in the workplace (SCOEL)
 - An advisory group of EU experts providing recommendations
- A decision making process on selection of substances and study design
- <u>A dedicated funding</u> for long-lasting programmes &
- Legal instruments or policies that integrate capacities, competences skills, and infrastructures (labs, biobanks).

HBM as policy tool – the way forward ?

EU/international:

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1. Commitment for harmonised HBM approach

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- 2. Development of E&H indicators
- Idea on feasibility of comparability of data
- 4. First set of reference data on environmental chemicals
- 5. Tested infrastructure in 17 countries
- 6. Expert network

National level:

- 1. Capacity building on practical application of HBM
- 2. Awareness raising about possibilities of HBM
- 3. Integration of national policies on food, environment and health
- 4. Agreements between industry and competent authorities
- 5. Selection of chemicals of interest ongoing and expanding (>100)

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Thank you for your attention

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